

Personalized management of atrial fibrillation

Fabritz, Larissa; Guasch, Eduard; Sinner, Moritz F; Kirchhof, Paulus

Citation for published version (Harvard):

Fabritz, L, Guasch, E, Sinner, MF & Kirchhof, P 2018, Personalized management of atrial fibrillation. in *ESC CardioMed* (3 ed.). Oxford University Press.

[Link to publication on Research at Birmingham portal](#)

General rights

Unless a licence is specified above, all rights (including copyright and moral rights) in this document are retained by the authors and/or the copyright holders. The express permission of the copyright holder must be obtained for any use of this material other than for purposes permitted by law.

- Users may freely distribute the URL that is used to identify this publication.
- Users may download and/or print one copy of the publication from the University of Birmingham research portal for the purpose of private study or non-commercial research.
- User may use extracts from the document in line with the concept of 'fair dealing' under the Copyright, Designs and Patents Act 1988 (?)
- Users may not further distribute the material nor use it for the purposes of commercial gain.

Where a licence is displayed above, please note the terms and conditions of the licence govern your use of this document.

When citing, please reference the published version.

Take down policy

While the University of Birmingham exercises care and attention in making items available there are rare occasions when an item has been uploaded in error or has been deemed to be commercially or otherwise sensitive.

If you believe that this is the case for this document, please contact UBIRA@lists.bham.ac.uk providing details and we will remove access to the work immediately and investigate.

Chapter 57.4 Personalized management of atrial fibrillation

ABSTRACT

Despite improved treatments, patients with atrial fibrillation are in need of personalized management to improve outcomes, and personalized strategies for atrial fibrillation prevention are needed to avoid the emerging atrial fibrillation epidemic. The pathophysiological heterogeneity driving atrial fibrillation and most likely its complications has led to a demand for a new disease taxonomy that better reflects disease mechanisms in atrial fibrillation. Genomic and biomedical differences could guide such a taxonomy as well as different social contexts and behavioural patterns. Interdisciplinary cooperation between scientists, clinicians and other healthcare providers, regulators, industry government agencies, and charities is required, to unleash the potential of personalized management of atrial fibrillation.

KEYWORDS

atrial fibrillation
personalized management
genomics
biomarkers
ECG
outcomes